

HELENA CIVIC CENTER BOARD - P.O. BOX 272 - HELENA, MT 59624

info@helenaciviccenterboard.org

Dear Vendor,

Beginning August 1, 2014 the Helena Civic Center Board Christmas Gift Show registrations will be accepted. The shows for 2014 will be **November 8th and 15th**. To allow for the greatest number of participants, each individual (or group) may book space for ONE DAY ONLY.

Booth Rental Information

- **\$75.00 per space if submitted by October 1, 2014.**
- **\$85.00 per space after October 1, 2014.**
- Limit of two spaces per individual or group (**each space is 10' wide and 8' deep**).
- Registration must include fee (check or money order).
- There will be a charge for any returned checks and subject to collection if the Board is not reimbursed as requested.
- Two chairs and one table will be provided per space.
- Food vendors must contact the City/County Health Department at 406.447.8361 or 447.8352 (Mon. – Fri. 1 - 5 PM) two weeks prior for either a short term permit or license.
- The Civic Center is a smoke-free facility.
- Vendors are responsible for any display equipment and merchandise. The Civic Center Board is not responsible for loss, theft or damage.

Set-up and Sale Day Information

- Friday set-up is included in registration fee and is available from 3:30 - 7 PM (please indicate set-up preference on registration form).
- Saturday set-up begins at 7 AM and must be completed by 9 AM.
- Sale is open to the public from 9 AM - 4 PM each Saturday. Displays are to be kept in place until sale closes.
- **Vendor parking** - is available at the Great Northern Town Center Parking Garage and is free on weekends beginning Friday at 8 pm. You will be charged for parking if you enter the garage before 8 pm Friday. **Please move your vehicle(s) from Civic Center area prior to the start of the sale to free up parking for YOUR SHOPPERS.**
- Two free admissions per space for workers (additional workers must pay \$2 admission).

Spaces will be designated by number and are non-transferable. Failure to comply with your assigned space constitutes grounds for removal. The Chairperson has full authority in any cases of noncompliance, and the Chairperson's decision is final. For Fire/Safety concerns proper aisle ways must be maintained at all times. Merchandise will not be allowed next to, or on the railings of the mezzanine.

Please mail your completed form and fee to:

CIVIC CENTER BOARD CHRISTMAS GIFT SHOW

P.O. BOX 272

HELENA, MT 59624

Confirmations will be sent beginning mid-September via email. If you are unable to supply an email address, we will mail your confirmation to the address on your form. In case of cancellation, a refund will be made up to two weeks before sale. There are no refunds due to weather. If you have questions, call Kathleen at 406.461.8785.

RECEIVING THIS LETTER DOES NOT GUARANTEE YOU A SPACE. SPACES WILL BE RESERVED WHEN YOUR REGISTRATION FORM AND CHECK ARE RECEIVED. THE CIVIC CENTER BOARD RESERVES THE RIGHT OF FINAL DETERMINATION REGARDING THE SUITABILITY OF EXHIBIT MERCHANDISE, AND FURTHER RESERVES THE RIGHT TO DETERMINE THE NUMBER OF AND TYPES OF MERCHANDISE ALLOWED ON EITHER DAY OF SALE.

REGISTRATION FORM
HELENA CIVIC CENTER BOARD CHRISTMAS GIFT SHOW
November 8 and 15, 2014

NAME: _____ PHONE: _____

EMAIL: _____ CELL: _____

(Confirmations will be sent beginning mid-September)

BUSINESS NAME: _____

ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

Make, model and license number of the vehicle(s) you or your group will be driving:

I understand that I (or my group) may participate only ONE of the event days.

Circle date you prefer:

SATURDAY, NOVEMBER 8
OR
SATURDAY, NOVEMBER 15

NOTE: If preferred day is full, you will be contacted and offered the opportunity to accept the other date.

No. of spaces: _____

(Limit of two spaces)

\$75.00/space submitted by Oct. 1

\$85.00/space after Oct. 1

No. of table(s): _____ (1 per space)

Chairs: _____ (2 per space)

Electrical outlet: _____ YES _____ NO

Friday Set Up (3:30-7:00 PM): _____

Saturday Set Up (7:00 – 9:00 AM): _____

Total Amount Enclosed: \$ _____

SPECIAL REQUESTS/HANDICAP ACCOMMODATIONS: _____

TYPE OF MERCHANDISE (please describe thoroughly):

Return this form and fee to:	Helena Civic Center Board Gift Show P. O. BOX 272 Helena, MT 59624
-------------------------------------	---

Completion and submission of this form constitutes full understanding and agreement to comply with the rules and regulations set forth for this sale.

Signature: _____ Date: _____